The Healthcare Effectiveness Data and Information Set (HEDIS) is a widely used set of healthcare performance measures developed and maintained by the **National Committee for Quality Assurance (NCQA).** HEDIS measures relate to many significant public health issues, such as cancer, heart disease, diabetes, and behavioral health. HEDIS data can be used for a variety of purposes, including tracking improvement related to quality improvement initiatives and identifying areas of weak performance and associated opportunities for improvement. Since the measures are standardized, they can also be used to directly compare performance among different healthcare programs.

Children's Division is presenting data on two HEDIS measures that relate to the quality of services received by Foster Care children:

The **Follow-Up Care for Children Prescribed ADHD Medication (ADD)** measure assesses children between the ages of 6-12 years who have been diagnosed with Attention Deficit Hyperactivity Disorder (ADHD) and have been prescribed ADHD medications.

There are two items making up this measure: the "Initiation Phase" determines the percentage of such children with at least one follow-up visit with a practitioner with prescribing authority within thirty (30) days of their first prescription of ADHD medication. The "Continuation and Maintenance Phase" looks at the percentage of such children who remained on the medication for at least 210 days, and had at least two follow-up visits with a practitioner in the nine (9) months after the Initiation Phase.

Follow-Up Care for Children Prescribed ADHD Medication (ADD)

Phase	Age Group	FY2019	FY2020
Initiation	6-12	38.4%	43.0%
Continuation and Maintenance	6-12	45.9%	53.8%

The second measure is **Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)**, which assesses whether children/adolescents without an indication for antipsychotic medication use had documentation of psychosocial care as first-line treatment before being prescribed an antipsychotic medication. These medications are sometimes prescribed for nonpsychotic conditions in children when safer psychosocial interventions, such as individual therapy, should be attempted first, before trying such medications.

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)

Age Group	FY2019	FY2020
1-11 (Children)	84.80%	82.5%
12-17 (Adolescents)	92.20%	92.3%
Total	89.50%	88.2%

NOTE: HEDIS measures are calculated on an annual basis. In an effort to meet the semiannual posting requirements, the Children's Division has scheduled the 2nd HEDIS report as a Fiscal Year (FY) review from July 1, 2019 – June 30, 2020.

* This HEDIS were produced from the previous online version of the 2020 HEDIS Report. A copy of the online version has been included in this report.

2020 HEDIS Report Previous Online Version

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Follow-Up Care for Children Prescribed ADHD Medication (ADD)

Phase	Age Group	CY2018	FY2019	CY2019	FY2020
Initiation	6-12	40.0%	38.4%	51.2%	43.0%
Continuation and Maintenance	6-12	41.1%	45.9%	56.6%	53.8%

The second measure is **Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)**, which assesses whether children/adolescents without an indication for antipsychotic medication use had documentation of psychosocial care as first-line treatment before being prescribed an antipsychotic medication. These medications are sometimes prescribed for nonpsychotic conditions in children when safer psychosocial interventions, such as individual therapy, should be attempted first, before trying such medications.

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)

Age Group	CY2018	FY2019	CY2019	FY2020
1-11 (Children)	92.70%	84.80%	81.20%	82.5%
12-17 (Adolescents)	93.00%	92.20%	91.40%	92.3%
Total	92.90%	89.50%	87.50%	88.2%